DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Advisory Committee on HIV and STD Prevention: Meeting

In accordance with section l0(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting.

Name: CDC Advisory Committee on HIV and STD Prevention.

Times and Dates: 8:30 a.m.–5 p.m., January 21, 1999. 8:30 a.m.–3 p.m., January 22, 1999. Place: Corporate Square Office Park, Corporate Square Boulevard, Building 11, Room 1413, Atlanta, Georgia 30329.

Status: Open to the public, limited only by the space available. The meeting room will accommodate approximately 100 people.

Purpose: This Committee is charged with advising the Director, CDC, regarding objectives, strategies, and priorities for HIV and STD prevention efforts including maintaining surveillance of HIV infection, AIDS, and STDs, the epidemiologic and laboratory study of HIV/AIDS and STDs, information/education and risk reduction activities designed to prevent the spread of HIV and STDs, and other preventive measures that become available.

Matters to be Discussed: Agenda items include issues pertaining to syphilis elimination; perinatal HIV elimination; behavioral surveillance; and HIV prevention research activities. Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Beth Wolfe, Committee Management Analyst, National Center for HIV, STD, and TB Prevention, 1600 Clifton Road, NE, Mailstop E–07, Atlanta, Georgia 30333. Telephone 404/639–8008, fax 404/639–8600, e-mail eow1@cdc.gov.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** Notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: December 11, 1998.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Inspector General

Solicitation of Information and Recommendations for Developing OIG Compliance Program Guidance for the Nursing Home Industry

AGENCY: Office of Inspector General (OIG), HHS.

ACTION: Notice.

SUMMARY: This **Federal Register** notice seeks the input and recommendations of interested parties into the OIG's development of a compliance program guidance for the nursing home industry and its providers and suppliers, especially those serving Medicare and Medicaid beneficiaries. Many providers and provider organizations have expressed an interest in better protecting their operations from fraud and abuse. The OIG has developed guidances for hospitals, clinical laboratories, home health agencies and third-party medical billing companies. Currently, the OIG has under development compliance program guidance for the durable medical equipment, prosthetic and orthotic supply industry and Medicare+Choice organizations with coordinated care plans. In order to provide a clear and meaningful guidance to those segments of the health care industry involved in the ownership and operation of nursing care facilities, the OIG is soliciting comments, recommendations and suggestions from concerned parties and organizations on how best to develop a compliance program guidance and reduce fraud and abuse within the nursing home industry.

DATES: To assure consideration, comments must be delivered to the address provided below by no later than 5 p.m. on February 16, 1999.

ADDRESSES: Please mail or deliver your written comments, recommendations and suggestions to following address: Office of Inspector General, Department of Health and Human Services, Attention: OIG-5-CPG, Room 5246, Cohen Building, 330 Independence Avenue, SW, Washington, DC 20201.

We do not accept comments by facsimile (FAX) transmission. In commenting, please refer to the file code OIG-5-CPG. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, in Room 5541 of the Office of Inspector General at 330 Independence Avenue, SW, Washington, DC 20201 on Monday

through Friday of each week from 8 a.m. to 4:30 p.m.

FOR FURTHER INFORMATION CONTACT: Stephen Davis, Office of Counsel to the Inspector General, (202) 619–2078.

SUPPLEMENTARY INFORMATION: The development of compliance program guidances continues as a major OIG initiative as a vehicle for engaging the private health care community in an effort to reduce fraud and abuse. This nursing home guidance represents another step in the OIG's plan to encourage the implementation of compliance programs in specific segments of the health care industry.1 As in the past, this guidance is designed to provide clear direction and assistance to Medicare and Medicaid nursing home providers, their owners and suppliers, who are interested in reducing and eliminating fraud and abuse within their organizations.

The guidance represents the culmination of the best suggestions and recommendations from the OIG and from representatives of the private health care community on how providers can most effectively establish internal controls and implement monitoring procedures to identify, correct and prevent fraudulent and wasteful activities. As stated in previous guidances, these guidelines are not mandatory for providers, nor do they represent an exclusive document of advisable elements of a compliance

In an effort to formalize the process by which the OIG receives public comments in connection with compliance program guidances, the OIG is seeking, through this **Federal Register** notice, formal input from interested parties as the OIG begins developing the compliance program guidance for Medicare and Medicaid covered nursing home facilities, their providers and suppliers. The OIG considers all comments, recommendations and

program.

The OIG anticipates that the nursing home guidance will contain seven elements that the OIG considers necessary for a comprehensive compliance program. These seven elements have been discussed in our previous guidances and include:

suggestions submitted and received by

the time frame indicated above.

• The development of written policies and procedures;

¹ See 62 FR 9435 (March 3, 1997) for clinical laboratories, as amended in 63 FR 45076 (August 24, 1998); 63 FR 8987 (February 23, 1998) for hospitals; 63 FR 42410 (August 7, 1998) for home health agencies, and for third party medical billing companies appearing elsewhere in this **Federal Register**. The guidance can also be found on the OIG web site at http://www.dhhs.gov/progorg/oig.